

PART B – FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail **Mail Stop ISSUE FEE**
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7590 08/13/2007

FISH & RICHARDSON P.C.
P.O. Box 1022
Minneapolis, MN 55440-1022

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/049,574	07/16/2002	Wolf Bertling	10848-018001	7496

TITLE OF INVENTION: METHOD FOR INDIRECTLY DETERMINING THE BLOOD-CLOTTING STATUS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$720	11/13/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
COUNTS, GARY W.	1641	435-007920

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. **Fish & Richardson P.C.**

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

november Aktiengesellschaft Gesellschaft für Molekulare Medizin

Erlangen, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

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- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

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5. Change in Entity Status (from status indicated above)

☐ .a. Applicant claims SMALL ENTITY status. See 37 CFR 1.2.7.

☐ .b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.2.7.(g)(2).

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(Authorized Signature)

M. Angela Parsons

(Date)

10
October 24 2007

Typed or Printed Name

M. Angela Parsons, Ph.D.

Registration No.: 44,282

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